1: Bowen-Jones et al. K-5 (1955-1958) 1961
EZ6 Malta EZ6

By the end of the century the struggle had resolved itself into extremes. Mizzi and his followers resorted to continuous legislative obstruction as the only but rather unworthy weapon left for what they maintained was a fight for responsible government. Strickland as Chief Secretary pointed correctly to the damaging effects such tactics were having on all policies including those of education, public health, etc., but conducted an offensive/defensive battle on equally intransigeant lines. Meanwhile British, imperial as opposed to economic, effort was at its climacteric and Malta as a fortress, whose only value was as a fortress, had to 'suffer' the consequences; a necessary qualification must be made that this really entailed only subordination in status and was accompanied by great advances in all that the mid-twentieth century would term 'welfare services'.

In 1903 Anglo-Italian relations were good and improving, the Crown and the Vatican, Governor and Archbishop all in amity, while in Malta, 180,000 people had 10,000 enfranchised electors of whom less than 4,000 ever voted. In the Legislative Council, however, tempers were at blazing point and obstruction produced deadlock. Followed Chamberlain's bombshell abrogating the constitution. With effect from 3rd June the Governor's Executive Council and the official group within the Council of Government were given majority power and complete control over policy and action. The reserve powers were re-invoked in all their strength. Malta entered the Modern Age in an unhappy political state, a state vocally resented by a few, ignored by the apathetic majority and a cause of unhappy puzzlement to Westminster.

In retrospect, to the writer at least, the most amazing feature of these developments appears to be their inevitability. Judged in isolation, it may appear facile to suggest that with the stage as set in preceding centuries, with players such natural 'typecast' products of past experience, no other play could have been produced. Judged along with the other evidence, the unity, the cohesion of all things Maltese do make it rather difficult to subscribe here to a doctrine of free-will.

Of the elements in Maltese social life most affected by institutional forces two are of very relevant interest to us, viz. public health and education. Some brief consideration is therefore given to the main developments of these sectors.

As noted in Chapter VI A the death rate in the Maltese Islands fluctuated considerably but showed a slowly accelerating decline. During the century that elapsed between the end of theNapoleonic Wars and the beginning of World War I, the main health improvements resulted from public works construction of a piped water-supply and sewerage systems in the most populated parts of the island of Malta. Developments in preventive remedial medicine and in disease control were slower mainly because of their greater dependence on trained medical staff and on public acceptance of new ideas.

At the mid-nineteenth century conditions were not very propitious for the consideration of suggestions for reducing mortality. Forecasts of impending Malthusian catastrophe were combined with diatribes on the improvidence of early marriage in many surveys by articulate Maltese of a presumed state of overpopulation. The inarticulate members of society continued to regard as normal conditions of which Sutherland (5) said: 'I have very seldom met with conditions so obviously injurious to health, and so likely to determine outbreaks of epidemic disease as those presented by many houses'. In Valletta the Knights had built a sewerage system and a piped water supply but pollution of the latter by the former was common. In the villages, the deficiency of water, refuse accumulation and the use of 'ordure rooms' were a product of ignorance and a cause of ill-health.

The Cholera epidemic of 1865 which slew 2,600 people eventually forced action upon the Government and after much general discussion a Commission of Public Health was appointed in 1874. Significantly enough, attention was focussed on the high rate of child mortality: in that same year, of over 4,000 recorded deaths, more than 2,000 were of children under five years of age. Between 1874 and the end of the century a series of reports put the blame on a series of associated factors. The ancient Three Cities and the new unrestricted

1: Bowen-Jones et al. K-5 (1955-1958) 1961
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urban growths of Hamrun and Sliema were centres of disease. The growth of urban and dockyard employment had not yet been accompanied by any striking educational improvements, and standards of personal hygiene barely tolerable in rural Malta became insupportable in the new towns. At the same time, the growing wealth and opportunities which made possible the new concentrations were not paralleled by similar rates of increase in Internal Revenue. The resulting shortage of capital available for public works delayed the construction of services until concern over conditions in the Garrison centres became acute. Between 1878 and 1886, a new system of drainage and flushing sewerage was constructed in Valletta, Floriana and the Three Cities, three-sevenths of the expenditure being provided by the military authorities. The 1897 sewerage extensions were similarly restricted to that area in which a financial vote could be subsidised by Imperial expenditure (Fig. 33). During this period also, the whole problem of water-supply first became acutely realised and under Chadwick (6) a water-use policy made an embryonic appearance. The 1909 proposals for island-wide sewerage were, significantly enough, for a sea-water flushing scheme, and in spite of depression-caused limitations public funds were made available for servicing the suburban areas of Hamrun and Birkirkara and the casal of Żejtun.

These and similar public works, limited in scale as they may now seem, were already having a controlling effect on epidemic disease by the end of World War I. In 1837 cholera killed 4,000 out of a population of c. 116,000; in 1917 fewer than a hundred people died out of a population which had doubled in size. Bubonic plague caused 4,600 deaths in 1813 but in 1917 only 3 mortalities followed a similar introduction of the disease. By the nature of her position and as a result of sea-borne contacts Malta has always been liable to the introduction of epidemic diseases. The nineteenth century intensification of urban and port activity which caused population concentration in a great conurbation, increased the external contact risk, made more acute the dangers of ignorance and low standards of hygiene but finally the associated expenditure of wealth derived from overseas, and improvements in domestic standards started a breakthrough into an epoch of adjusted and improved values placed on human life.

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In the educational field, progress was necessarily slower in that while public health measures were essentially a matter of providing physical services which previously did not exist, formal education had to be accepted *ab novo* by the great unlettered mass of the population, and secular public instruction had to meet the suspicions of the educated few associated with the Church-dominated, Italian-influenced University and academies (7).

British rule was followed by Government controlled education. The first elementary school was opened in 1819 and in 20 years' time there were 11. In 1842 the elementary school system was removed from the authority of the University, as recommended by the Royal Commissioners in 1838 (8), and its effectiveness was considerably increased. Even so, illiteracy was still high at mid-century (9) and the labouring classes still relied for information and guidance on the traditional sources - the Church and to a less extent the gentry.

The 1836 Commissioners noted a situation which is still not completely rectified (10). They blamed the educated classes for lack of initiative in permitting the continuance of an educational system which was geared to the training of priests, lawyers, doctors and civil servants and which virtually ignored wider social and technical needs. This same complaint was reiterated by Keenan in 1880 (11) and by Casolani, Director of Emigration in the 1930's (Chapter VI A). Through inertia rather than by deliberate act, the old social cleavage between the 'Two Nations', was being maintained.

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A prime difficulty was that of language. The Census compilers of 1881 commented thus on the root of the trouble (12): 'The Maltese ... form part of the European family, however they speak the dialect of a language belonging to an oriental people with whom they have no social tie nor connection ... As the dialect is confined to the Islands of Malta consequently very few literary productions are published in the vernacular, a circumstance which evidently does not favour the diffusion of instruction among the lower classes of the people.

1: Bowen-Jones et al. K-5 (1955-1958) 1961
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is uneasily superimposed on the traditional pattern. The part played by the Church during the 1956 Referendum on integration with the United Kingdom was most complicated. During the disturbances following the breakdown of Government in the spring of 1958, town and country, proletariat and bourgeoisie, Maltese Malta and Latinised Malta, all reacted differently. Over all responsible actions looms the knowledge that Malta is not a viable independency (4).

As we have seen, education and language have been inextricably involved in politics (5). More directly important is the educational effect on the people as a whole of the system of public instruction. Under the leadership of Dr. Albert Laferla public education became vastly improved in all ways (6), and from his tutelage, more particularly after the Compulsory Attendance Act of 1924, came the generation of Maltese which now forms economically and socially the most important part of the population. After 1933, Italian ceased to be used as a medium of instruction, a standard Maltese orthography came into use (7), and the school system was expanded to meet the most obvious and immediate needs. Education was sadly disrupted by World War II but since that time has continued to improve in quality and range of facilities (8). Compulsory Education as distinct from compulsory attendance came into force in 1946, and in 1955 full-time education became the rule. Some 22 per cent. of children of school age still receive education in private, usually Church run, schools.

It is vital to realise the extent of the social and economic revolution implied in these developments. In the rural areas the change has been one from illiteracy to education within one generation. Even in the towns, and this is particularly true for the new growths associated with dockyard, manufacturing and service industry employment, thoughts and activities are being fundamentally affected by education for the first time in Maltese history. Contrasts between the levels of awareness of the value of formal education are considerable, and the full impact of technical education has yet to be felt - the first Government Technical School was opened in 1934. The chief contrast observable in the field however is between the two age groups, over and under 30 to 35 years of age. The former still contains many illiterate and therefore conservative people; the latter by reason of training as well as age is radical and impatient. The latter attitude is largely responsible for the drift from the land which encourages the domination of agriculture by residual conservatism.

In the field of public health, skeletal public works services had been constructed before World War I. Recent developments may be regarded as logical extensions both in the sector of public works and in the field of medicine. As late as 1936 the judgment of the Chief Government Medical Officer was 'no scheme of sanitary reform ever met with greater opposition than the establishment of the modern sewer system in Malta' (9), but by 1955, about 270,000 or over 90 per cent. of the Maltese population lived in sewered dwellings, Żurrieq alone among the large villages remaining unserved. In parts of the countryside and in the smaller villages, dispersion of settlement renders prohibitive the cost of connection of each dwelling with the public sewers. The more isolated and the more rural areas are now the regions of lowest standards (Fig. 33).

Medical services, particularly in their relevance to the problem of high infant mortality, developed late and slowly (10). The most serious obstacles were those rooted in Maltese social life (11). The strength of the matriarchal tradition in Maltese household has meant that the ignorance of the oldest generation persists in imposing itself on the life of the youngest. Dirt, overclothing and under-feeding, the indiscriminate and early use of farinaceous foods, all these were difficult to eradicate in overcrowded and grandmother-dominated conditions (12). The difficulty of educating in hygiene and personal health an indifferent and tradition-bound population proved insuperable and in 1930 the infantile mortality rate was as high as the average for the preceding 30 years.

The final breakthrough occurred paradoxically during World War II. In 1943 and 1944 housing conditions and diet were worse than any experienced in peacetime but the death rate and the infantile mortality rate began to fall to record

[Text Continues on P. 179]

1: Bowen-Jones et al. K-5 (1955-1958) 1961
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low levels. Earlier improvements probably supplied the basis for change but more important was the fact that, for the first time, the effective Garrison of Malta included the whole population. The new machinery for public information, the desperate need for reducing disease incidence and preventing epidemics, and even food rationing and shortage had cumulatively beneficial effects on the public mind. More than all, it would seem, the military control of the besieged islands with its conscription of many Maltese males and the increased contact of British troops with the people, together with that strange uniting exaltation in face of danger observed in other countries, all shocked Malta into new ways of thought (Fig. 66).

After the war this momentum was maintained during the period of reconstruction. The Malta Memorial District Nursing Association, Child Health Clinics, and U.N.-established ante-natal clinics have now been accepted and their services utilised. In 1959 the infantile mortality rate was 34.7 per 1,000, leaving the memory of the rate of 350 per 1,000 in 1942 far behind.

This revolutionary change is of particular revelance to this study. Many of its implications need no labouring. The demographic consequences, for instance, are obvious enough, as also the slowness with which traditional ways of life in Malta have changed. For us the most important consequence is that rising generations through a new awareness of causation and consequence, of scientific processes, are becoming vulnerable to new ideas in associated fields. There are no great steps between preventive human medicine, inoculation, livestock injections and an appreciation of plant pathology. One difficulty remains; the rural areas are the least affected by these recent changes, and those individuals in the countryside who are mentally injected with new ideas and understanding are, for various reasons, the least likely to remain in agriculture.

Exemplifying this continuing regional dichotomy, but unity in complexity, is the recent history of milk consumption and production (13). Traditionally in Malta, 'the entire milk supply has been delivered by the goat herself' (14). Sometimes living with their flocks in the *fossa* which surround Valletta, the herdsmen would wander the streets, milking the animals on demand. Bruce and Zammit in 1885 and 1905 showed that the bacillus of Undulant or Malta Fever was freely excreted in goats milk and that the high incidence in Malta of this debilitating, sometimes lethal, disease was a natural consequence of the general albeit low per capita consumption of fresh milk from predominantly diseased goats. After considerable investigation, a milk pasteurising plant was erected and the first pasteurised milk was distributed, Valletta, Floriana and Sliema being declared 'closed areas' within which the sale of raw milk became illegal. During World War II, further extension of this policy was prevented but, since most goats were slaughtered for meat because of fodder shortage and because consumption of tinned milk became normal, the incidence of Malta fever fell to record low levels. Post-war revival in goats' milk production resulted in general re-infection by brucellosis and in 1948 the incidence of undulant fever was the highest ever recorded. During the post-war period public health and welfare policies have encouraged the consumption of milk. Because of the incidence of Malta fever, this has entailed the provision of expensive pasteurising plant, the prevention of the sale of unpasteurised, and the official encouragement of production of cows' rather than goats' milk.

This particular development is examined at greater length in Chapter X but some main points of general import merit consideration here. First, Maltese society has recently been affected by social, dietetic and medical policies which profoundly affect the basis of social life. In general one might say that the Maltese way of life is being made more remote from the simple crudities of parochial experience. Secondly, in the field of health and social welfare, the criterion of scientifically measured need has been adopted as the basis of official policy and the question of availability of resources is regarded as of secondary importance. Thirdly, this increasing social sophistication has only very recently become operative in Maltese life and different scales of value exist in different generations and in different social groups. Lastly, it would be fair to say that, while the urban markets are still only relatively fastidious

178 about quality and as yet incompletely dominated by ideas of welfare economics,
185 the rural community is far less affected by change. While milk consumers in
the towns are often either not completely convinced of the need for milk process-
744 ing or at the other extreme will use only imported tinned milk where possible,
the producers are generally even less convinced of the need for care in the
production of clean milk. Unpasteurised goats' milk is still generally used in
those farming households where milk is consumed at all, and understanding of
the processes of infection is but slowly growing. Thus, in the field of public
health and personal hygiene and medical care, social changes have been rapid,
recent and uneven in incidence. Here, as in the economic sector, the mental
acceptance of new ideas is not yet complete and is least advanced in the most
rural and remote regions.

163 The examination already made of the demographic situation in the Maltese
369 Islands needs some brief consideration against the background of social
842 attitudes. The consensus of expert opinion is that in developing societies a falling
birth rate is the result not of an actual decline in fertility but of family
limitation. In most regions such a decline in family size is associated with
795 changed social attitudes, which have become accepted in many countries in which
Roman Catholicism is the dominant religion. Pope Pius XII himself condemned
irresponsible parenthood and said it is 'a mistake and a departure from moral
truth to exalt too highly the generative function even in its right moral setting
of married life' (15).

The insularity and historical experience of Malta have preserved there a more rigid and strict application of Catholic rules of conduct, in which, despite the inadequacy of the Islands' resources to provide for the economic welfare of the population, the virtues of the large family are still stressed. Archbishop Gonzi in 1958 reminded an audience of young people that, although large families entailed much sacrifice on the part of the parents, parents should be prepared for a life of sacrifice (16). Father Vella, the founder of the Cana movement has said: 'One of Malta's glories is her large families' (17).

In Malta therefore the weight of the Church tends to discourage the secular social trend towards smaller families, and still makes illegal any provision for family limitation. Where secularism is strongest, in the urban cosmopolis, family size declines most rapidly. In the rural communities, where the precepts of the Church are most conscientiously observed and where the effect of secular socio-economic desires is most restricted, large families are normal and admired.

163 This regional contrast in social behaviour, when superimposed upon purely
369 demographic variations in rates of population growth, becomes sometimes
842 emphasised and sometimes negated. In the northern third of Malta, inward
internal movement as a consequence of 'pioneer' agricultural settlement during
and after the mid-nineteenth century produced a 'young' population, high birth
rates and rates of natural increase. This region has remained almost entirely
rural in social character. The second main region of inward movement of
population, the suburban area, has experienced a recent decline in the early
high birth rates as a result of the impact of secular ideas.

The urban heart of Malta in Valletta and Floriana by contrast, has been both traditionally a zone of outward movement of population and the district most affected by changes in social attitudes to family propagation. The remaining area, the heart and core of Maltese 'casal' life, illustrates clearly the delicate balance between demographic and religious and secular social influences. From
[166] this central area have traditionally gone the migrants to the new towns and the 'new' northern farming areas. The efflux has counteracted the traditionally rural and strongly religious tendency towards large families and a high rate of natural increase. On the southern fringe of this zone however lies the Żurrieq group of 'casals' and villages. From this until recently relatively isolated district, emigration has never been high and, with a survival of traditional rural values, this region has had in the 1950's the consistently highest birth rates - over 30 per 1,000 - of the *Maltese* population.

2: Boissevain E-5 (1960-1961) 1965
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[p. 15]

CHAPTER II

The National Organizations: State, Church and Political Party

Generally speaking, the activities of government are carried out by a number of departments and boards, each of which is under the control of a director or chairman. Each of these, in turn, is usually responsible to an elected Cabinet Minister. But under the interim constitutional arrangements which followed the resignation from office of the Labour Party in 1958, Department Heads were responsible to a British Chief Secretary and his assistants. Under each Department Head are ranked the various grades of civil servants. These run from the Executive and Clerical Officers through non-pensionable clerk-typists, fatiguemen and industrial labourers. Altogether, some 17,000 persons work for the government. They represent 19 per cent of the total labour force. This makes the Malta Government the largest employer on the islands. Entrance to all but the lowest grades, and promotion between the principal grades within the civil service, are by means of open competitive examinations.

Malta's small size has facilitated the centralized administration required of an island fortress. As already observed, there are no councillors, headmen or mayors, either elected or hereditary, to represent the interests of the villagers to the government or convey the wishes and commands of government to the people. Virtually all the machinery and personnel of government are located in Valletta. Only the police represent government authority in all villages. There are government elementary schools for boys and girls in all villages and almost all hamlets. Now most villages also have a dispensary which is open for a few hours a day under the supervision of a government District Medical Officer and a nurse. There are a few regional post offices and branches of the Department of Emigration, Welfare and Labour. All other public services, such as street sanitation, sewerage (where it exists), water, electricity, repair of roads and so on, which in

[Village of Mġarr]

Building went ahead slowly on the immense construction as costs were defrayed by private subscription in kind and in money, and the villagers were themselves responsible for much of the labouring work. Money and farm produce of every variety was given towards the cost which, in 1939, had passed £10,000 (B/54 - 12.8.1939); this in a parish which even ten years later had no more than 2,218 people (B/167 - 1948).

175 346 794

With the growth of Mġarr, assistant priests were attached to the Parish, notably Father (later Monsignor) Edgar Salamone, who went to the village in 1920 and became Parish Priest a decade later. The work of this one priest not only pays him personal tribute but illustrates the way in which Mġarr acquired the characteristics and features possessed by other villages of much longer standing in the Islands, with the Church itself as the prime consideration and focus of energy and resources. Mgr. Salamone was "sickened by the ignorance and backwardness of the people of Mġarr"[15] and set about establishing some sort of schooling in the village. He acquired premises, used at week-ends by the part-time village barber, and opened a school in 1920 for about 40 children and adults. Three years later a Government elementary school was opened (19.9.1923) and support for this still novel feature of the village grew fast enough for nearly all children to be attending when the Compulsory Attendance Act was passed in 1926.

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At this time the health of the villagers was cared for by a Dispensary which opened once a week and by Mgr. Salamone himself. A statement in the Malta Legislative Assembly of 1933 observed that the Priest of Mġarr kept "a medicine chest of his own and people used to call on him at all hours of the day and night. He used to pack up his medical kit and go to anyone's bedside, whenever he was called for" (B/291, p.6). As in all things the villagers turned to their Priest in difficulty or trouble whether spiritual, medical or social, as had been the custom for centuries. In 1933, however, the first medical officer for Mġarr began his duties in the village, and another of the traditional functions of the Priest passed to specialist hands.

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After this, interest was turned again to building and the spacious esplanade in front of the Church was laid out in 1935, followed by a nearby construction to house the Police Station, Post Office, Government Dispensary and the District Medical Officer. Once again the villagers themselves were responsible for a great deal of the building work, as they were in the case of the Church which continued to grow until its completion and dedication in 1948 - at a total cost of some £16,000[15]. By the mid-thirties Mġarr had

175 346 344

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9: Luke G-5 (ca. 1920-ca. 1960) 1960
EZ6 Malta EZ6

654 Governor's intention to ask the International Bank for Reconstruction and Development for advice from time to time on
433 current problems of the Maltese economy and on the plans for
648 Malta's economic development.

9. Private industrial development is to be assisted by the Aids to Industry legislation which the Governor intends to enact this month. This will offer substantial fiscal incentives to new industries to establish themselves in the Islands. New industries establishing themselves in Malta will also be eligible to apply for grants and loans. In administering these various incentives to industrial development the Governor will be assisted by an influential advisory body on which there will be Maltese representatives. This body will be under the chairmanship of Lord Hives, who is already familiar with Malta's problems.

Her Majesty's Government have now decided to contribute a sum of up to £29,000,000 over the next five years towards the cost of Malta's capital programme, the conversion of the dockyard to civil use and the encouragement of new industries.

642 The 1959 Constitution came into operation, as it happened,
654 on the 15th April, which is celebrated in Malta as George
648 Cross Day. It provides for the administration of the islands by the Governor with the aid of a part-official, part-nominated Executive Council with Maltese representation, an arrangement similar to that in force between 1936 and 1939. There was also enacted the Aids to Industry legislation foreshadowed in Mr Lennox-Boyd's Statement; Messrs Bailey successfully took over the Dockyard, which had been converted into a commercial undertaking with the financial help of the British Government; work was inaugurated on the construction of a new deep-water wharf in the Grand Harbour.

•744 Sir Robert Laycock's term of office, while politically
73 frustrating, ended with a year of economic advance and new hopes. It also saw an immense advance in social services such as District Nursing and the care of handicapped children, orphans and victims of infantile paralysis under the vigorous

9: Luke G-5 (ca. 1920-ca. 1960) 1960
EZ6 Malta EZ6

leadership and in some cases on the initiative of Lady Laycock, who worked in close association with the Archbishop of Malta and voluntary helpers clerical and lay. 744 73

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History tends to repeat itself, not least in Malta. In the times of the Knights the flags of eight Langues or Nations waved over their respective sectors of the island's defences. To-day, from the Headquarters of the Allied Forces, Mediterranean (HAFMED) beside the ancient granaries of Floriana, there fly the flags of six of the NATO Nations, Great Britain, France, Greece, Italy, Turkey and the U.S.A. There is only one change since the days when the banners of the Langues symbolized a League of Christian Nations banded against a common foe and a common danger. In the Malta of the Knights the common foe had been the Turk; to-day the star and crescent of Turkey fly over the walls of Malta beside the flags of Turkey's allies in NATO, emblematic of a common defensive partnership against a very different foe. Christian and Moslem are now linked in alliance against an ideology whose enemies are God and freedom. 648

The cosmopolitan impact of NATO officers and their wives and daughters on the Island's society has made Malta once more what the traveller Patrick Brydone called it in the reign of Grand Master Pinto, "the epitome of all Europe."

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